

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

KJ-100



In re Application of	JACQUELINE R. Doyle et al	
Application Number	09/364,343	Filed 07/30/1999
For	WOUND IRRIGATION AND DEBRIDING SYSTEM	
Group Art Unit	3763	Examiner Menden, MANUEL A.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ _____
- ☐ Two months (37 CFR 1.17(a)(2)) \$ _____
- ☒ Three months (37 CFR 1.17(a)(3)) \$ 920 -
- ☐ Four months (37 CFR 1.17(a)(4)) \$ _____
- ☐ Five months (37 CFR 1.17(a)(5)) \$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 460 -

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☐ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____
 I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record.

☒ attorney or agent under 37 CFR 1.34(a).
 Registration number if acting under 37 CFR 1.34(a) 24,178

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

January 27, 2003
 Date

Arthur A. Smith, Jr.
 Signature

ARTHUR A. SMITH, JR.
 Typed or printed name

01/31/2003 BNGUYEN1 00000095 09364343

02 FC:2253

455.00 OP

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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